# Complete Summary

#### TITLE

Advanced chronic kidney disease (CKD): percent of patients with iPTH greater than 100 pg/mL (or greater than 1.5 times the upper limit of normal for each assay used).

# SOURCE(S)

Renal Physicians Association. Appropriate patient preparation for renal replacement therapy. Rockville (MD): Renal Physicians Association; 2002 Oct 1. 78 p. (Clinical Practice Guideline; no. 3).

#### Brief Abstract

## **DESCRIPTION**

This measure assesses the percent of patients with immunoreactive parathyroid hormone (iPTH) greater than 100 pg/mL (or greater than 1.5 times the upper limit of normal for each assay used) among patients with advanced chronic kidney disease (CKD).

#### **RATIONALE**

Renal osteodystrophy is a complex and multifaceted disease process that begins early in the course of chronic kidney disease (CKD) and is a major, long-term complication associated with high rates of morbidity. The metabolic and skeletal derangements associated with renal osteodystrophy are not easily reversed and, therefore, early interventions are crucial.

Therapy can prevent the progression of secondary hyperparathyroidism (HPTH). Six prospective randomized, controlled trials have shown that therapy is safe and effective.

HPTH reflected by high immunoreactive parathyroid hormone (iPTH) levels may exist in the face of normal serum calcium and phosphorus, and may require the use of active vitamin D metabolites.

# PRIMARY CLINICAL COMPONENT

Advanced chronic kidney disease; renal osteodystrophy; hyperparathyroidism; hyperphosphatemia; immunoreactive parathyroid hormone

#### DENOMINATOR DESCRIPTION

The number of adult patients with advanced chronic kidney disease (CKD), not currently receiving renal replacement therapy

## NUMERATOR DESCRIPTION

The number of patients from the denominator with immunoreactive parathyroid hormone (iPTH) greater than 100 pg/mL (or greater than 1.5 times the upper limit of normal for each assay used)

## **Evidence Supporting the Measure**

## PRIMARY MEASURE DOMAIN

Outcome

#### SECONDARY MEASURE DOMAIN

Not applicable

# EVIDENCE SUPPORTING THE MEASURE

A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences A systematic review of the clinical literature

## NATIONAL GUIDELINE CLEARINGHOUSE LINK

• Appropriate patient preparation for renal replacement therapy.

#### Evidence Supporting Need for the Measure

## NEED FOR THE MEASURE

Unspecified

#### State of Use of the Measure

STATE OF USE

Pilot testing

**CURRENT USE** 

Internal quality improvement

## Application of Measure in its Current Use

# CARE SETTING

Ambulatory Care Physician Group Practices/Clinics

## PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

**Physicians** 

# LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Individual Clinicians

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Either male or female

# STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

#### Characteristics of the Primary Clinical Component

# INCIDENCE/PREVALENCE

Unspecified

# ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

**BURDEN OF ILLNESS** 

Unspecified

**UTILIZATION** 

Unspecified

COSTS

Unspecified

## Institute of Medicine National Healthcare Quality Report Categories

## **IOM CARE NEED**

Living with Illness

IOM DOMAIN

Effectiveness

#### Data Collection for the Measure

#### CASE FINDING

Users of care only

# DESCRIPTION OF CASE FINDING

Adult patients 18 years and older with advanced chronic kidney disease (CKD)

# DENOMINATOR (INDEX) EVENT

**Clinical Condition** 

## DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Adult patients age 18 years and older with chronic kidney disease stage 4 or 5 (glomerular filtration rate [GFR] less than or equal to 30 mL/min/1.73 m<sup>2</sup>), not currently receiving renal replacement therapy

Exclusions Unspecified

## NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

The number of patients from the denominator with immunoreactive parathyroid hormone (iPTH) measurement greater than 100 pg/mL (or greater than 1.5 times the upper limit of normal for each assay used)

Exclusions Unspecified

## DENOMINATOR TIME WINDOW

Time window precedes index event

## NUMERATOR TIME WINDOW

Episode of care

DATA SOURCE

Administrative data Laboratory data Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

OUTCOME TYPE

Clinical Outcome

PRE-EXISTING INSTRUMENT USED

Unspecified

#### Computation of the Measure

**SCORING** 

Rate

INTERPRETATION OF SCORE

Better quality is associated with a lower score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

#### **Evaluation of Measure Properties**

EXTENT OF MEASURE TESTING

Unspecified

#### Identifying Information

ORIGINAL TITLE

Number of patients with iPTH greater than 100 pg/mL (or greater than 1.5 times the upper limit of normal for each assay used) / number of patients with advanced CKD.

#### MEASURE COLLECTION

Renal Physicians Association Clinical Performance Measures on Appropriate Patient Preparation for Renal Replacement Therapy

## MEASURE SET NAME

Renal Physicians Association Clinical Performance Measures for Bone Disease Recommendations

#### DEVELOPER

Renal Physicians Association

#### **ADAPTATION**

Measure was not adapted from another source.

## RELEASE DATE

2002 Oct

#### **MEASURE STATUS**

This is the current release of the measure.

# SOURCE(S)

Renal Physicians Association. Appropriate patient preparation for renal replacement therapy. Rockville (MD): Renal Physicians Association; 2002 Oct 1. 78 p. (Clinical Practice Guideline; no. 3).

# MEASURE AVAILABILITY

The individual measure, "Number of patients with iPTH greater than 100 pg/mL (or greater than 1.5 times the upper limit of normal for each assay used) / number of patients with advanced CKD," is published in "Renal Physicians Association Clinical Practice Guideline #3: Appropriate Patient Preparation for Renal Replacement Therapy."

For more information, contact RPA at 1700 Rockville Pike, Suite 220, Rockville, MD 20852; phone: 301-468-3515; fax: 301-468-3511; Web site: <a href="https://www.renalmd.org">www.renalmd.org</a>; e-mail: <a href="mailto:rpa@renalmd.org">rpa@renalmd.org</a>.

#### NOMC STATUS

This NQMC summary was completed by ECRI on May 23, 2003. The information was verified by the Renal Physicians Association on June 17, 2003.

## COPYRIGHT STATEMENT

This NQMC summary is based on the original measure, which is subject to the measure developer's copyright restrictions.

For more information, contact RPA at 1700 Rockville Pike, Suite 220, Rockville, MD 20852; phone: 301-468-3515; fax: 301-468-3511; Web site: <a href="https://www.renalmd.org">www.renalmd.org</a>; e-mail: <a href="mailto:rpa@renalmd.org">rpa@renalmd.org</a>.

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